



Attorney Docket No.: CRE-05-1241

In re Application of Brian P. Couchey, et al.

Serial No.: 10/731,754

Filed: December 8, 2003

For: SPOOL HAVING REVERSING SPIRAL GUIDE

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

(Col. 1) (Col. 2) (Col. 3)

SMALL ENTITY

OTHER THAN  
SMALL ENTITY

|  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHEST<br>NO. PRE-<br>VIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|---|--|------------------|
| TOTAL  | * 17                                      | - | ** 20=                                     | 0                |
| INDEP.   | * 6                                       | - | ** 4=                                      | 2                |
| Application Size Fee                           |   |   |  |                  |
| First Presentation of Multiple Dependent Claim |   |   |  |                  |

| RATE   | ADD'L<br>FEE |
|--------|--------------|
| x25 =  | \$           |
| X100 = | \$           |
|        | \$           |
| +180=  | \$           |

OR

| RATE   | ADD'L<br>FEE |
|--------|--------------|
| x50 =  | \$           |
| x200 = | \$400.00     |
| x250=  | \$           |
| +360=  | \$           |

TOTAL ADDITIONAL FEE \$ \_\_\_\_\_ OR \$400.00

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 50-2719 in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$1190** is attached which covers the additional independent claim fee (\$400) and the Request for Continued Examination fee (\$790).
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,

**BRIAN P. COUCHEY, ET AL.**

By: 

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TJD/WLB/sh



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**CUSTOMER NO. 35811**  
Docket No.: CRE-05-1241  
Confirmation No.: 4290

Art Unit : 3654  
Examiner : Nguyen, John Quoc  
Serial No. : 10/731,754  
Filed : December 8, 2003  
Inventors : Brian P. Couchey, et al.  
Title : SPOOL HAVING REVERSING SPIRAL GUIDE

Dated: September 5, 2006

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**Certificate of Mailing Under 37 CFR 1.8**

For

Postcard

\$1190 Check for additional independent claim fee (\$400) and RCE fee (\$790)  
Amendment Transmittal Letter, in duplicate  
Request for Continued Examination Transmittal Form, in duplicate  
Response to Third Office Action

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date appearing below.

Name of Applicant, Assignee, Applicant's Attorney  
or Registered Representative:

DLA Piper US LLP  
Customer No. 35811

By: *Sarah J. Ansell*  
Date: *September 5, 2006*